



# 2018 FALL LEAGUE REGISTRATION FORM

## Little Major League 11 & 12 Year Olds - Dizzy Dean Baseball

### INSTRUCTIONAL FALL BASEBALL PROGRAM

No returning teams. All players must register individually and will be drafted to a team.

Practices will be held at your registration location. Games may be played at any of the parks listed below.

### REGISTRATION DATES

Saturday, August 18; 9-11am

Tuesday, August 21; 5:30-7pm

Thursday, August 23; 5:30-7pm

### WHERE

Meridian Park Concession Stand

Winthrop Park Concession Stand

\* Registration forms can also be dropped off or mailed to:  
PRNA, 912 Myers Park Dr. 32301 by August 24

### SEASON DATES

September 17 - November 9

### COST

\$65.00 payable to the Park at registration

### WHO

11 & 12 year olds

Players cannot turn 13 before May 1, 2019

### EVALUATIONS

Saturday, August 25, 2018

Meridian Park - 8am

Winthrop Park - 8am

### WHAT TO BRING

REGISTRATION: Registration Form

Fee

Copy of Birth Certificate

EVALUATIONS: Glove & Bat

Catchers should bring their equipment

League sponsored by: PRNA and Council of League Presidents of Tallahassee

PLAYER'S NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

SHIRT SIZE \_\_\_\_\_ FIELD POSITION \_\_\_\_\_

MEDICAL CONDITIONS \_\_\_\_\_

PARENT NAME \_\_\_\_\_ • PARENT NAME \_\_\_\_\_

ADDRESS/ZIP \_\_\_\_\_ • ADDRESS/ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ TXT # \_\_\_\_\_ • PHONE \_\_\_\_\_ TXT # \_\_\_\_\_

EMAIL \_\_\_\_\_ • EMAIL \_\_\_\_\_

ARE YOU INTERESTED IN BEING A: HEAD COACH \_\_\_\_\_ ASSISTANT COACH \_\_\_\_\_

RESIDENCY: CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ OTHER \_\_\_\_\_

By my signature below, I understand that participation in sports may cause injuries. I agree by my signature below that in the event my child is disabled, injured or incurs a disease of temporary or permanent nature that I will waive all claims or liabilities against the City of Tallahassee, City of Tallahassee Parks, Recreation & Neighborhood Affairs Department (PRNA), Council of League Presidents of Tallahassee (COLP), and Volunteer Park Associations. I hereby certify and take full responsibility that my child's age and address as shown above are correct and meets the requirement of league and zone rules indicated on this registration form. PRNA reserves the right to photograph/video facilities, activities, and program participants for potential future use. All photos/video will remain the property of PRNA and may be used for publicity or promotion purposes only.

### PARK USE ONLY

TEAM: \_\_\_\_\_

AMT PD: \_\_\_\_\_

CHK# \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_